



POP Briefs

Improving Access to Family Planning Through the Private Sector

Providing family planning and reproductive health care is an urgent priority in the developing world. According to recent estimates by the World Health Organization, some 150 million women would like to plan the timing and spacing of their children, but are not doing so. This need for services will grow as the number of married women of reproductive age will increase an estimated 15 million annually between now and 2015. Additionally, sexually transmitted infections are rising: last year, 1.3 million women died from AIDS and another 2.2 million were newly infected with HIV. One billion young people are in their reproductive years, another two billion are right behind them. Most of these youth live in developing nations.

Public sector health care alone cannot meet these growing needs. Even as many governments in developing nations find they are unable to maintain, much less expand, existing health systems, they are experiencing shortages in donor funds. Many countries have been forced to redesign the role of the public sector in health care provision. To support this effort, USAID is forming partnerships with the private sector to stimulate its involvement in providing family planning and reproductive health care.

Increase access. USAID works to increase access to family planning products by low and middle-income consumers by making contraceptive supplies available at an affordable price. This effort entails

negotiating agreements with retailers, private health professionals and facilities, and health insurance companies to offer products at a low cost. These agreements also improve access by training providers and by making contraceptives available through private physicians as well as at pharmacies and other

outlets, including informal vendors selling in markets, bars, snack kiosks, and other easy-to-get-to locations.

Provide funding and loans. The USAID- supported Summa Foundation makes direct loans and equity investments to private clinics, HMOs, or insurance companies to expand and improve existing activities or to encourage a company to enter the market. Summa also makes direct loans to non-governmental organizations involved in product distribution or service provision, and designs and finances revolving small or micro loans to individual healthcare providers, such as midwives, doctors, and pharmacists.

Build demand. USAID's social marketing programs harness commercial and non-profit channels to ensure that people get the health information they need, to make health products and services widely available at low cost, and to develop public education and promotion campaigns for media that motivate people to use family planning and practice healthful behaviors.

Recruit non-traditional health care workers. USAID recruits local midwives, healers, and traditional birth attendants to create a network of auxiliary health care



Center for Population,
Health and Nutrition

U.S. Agency for
International Development

1300 Pennsylvania Ave., NW,
Washington, DC
20523-3600

Tel: 202-712-0540
Fax: 202-216-3046

E-mail: pln@usaid.gov
Web site: www.info.usaid.gov

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workers who can provide family planning services. These networks not only increase access to family planning and reproductive health services, they stimulate private sector involvement.

Involve employers. USAID helps employers develop cost-benefit analyses, encourages them to change corporate policies, helps them establish work-place based health clinics and work site activities that promote family planning, and urges corporate-funded community outreach and cause-related marketing.

Change policies and reduce regulatory barriers. On request, USAID works with local governments to review and change policies that constrain private providers from offering reproductive health services. Changes in policy also can improve countries' restrictive regulatory environments that can affect retailers. Bans on certain products or services, medically unnecessary prescription requirements, and restrictions on where and by whom products can be sold are among the barriers that most affect the for-profit sector. (1) For example, in Zimbabwe, physicians who do not practice within 5 kilometers of a pharmacy are not allowed to prescribe oral contraceptives. (2)

Integrate family planning into health plans. Partnerships with pre-paid health plans can establish or expand private sector family planning services. Similarly, government-administered social security programs can be broadened to include reproductive health and family planning services.

Indonesia. The U.S. now exports more to South Korea in one year than the total level of U.S. assistance ever provided.

■ USAID's population program has promoted the development of safe, effective contraceptive technologies in the U.S., accounting for thousands of research, development, and manufacturing jobs. Americans also have profited from this research, through the introduction of such methods as low-dose oral contraceptives and the female condom.

Program Successes:

The government of Morocco has been a leading recipient of USAID family planning assistance for three decades. Assistance is being phased out, and the government is taking over. Because of USAID support, thousands of providers were trained and innovative service delivery and management systems were developed. Since 1983, use of modern contraceptives has more than doubled and today, 49 percent of married women of reproductive age use contraception. Average family size has declined by almost half, to 3.1 children, and maternal deaths have dropped from more than 3,000 annually to less than 1,500 annually.

USAID supported family planning and reproductive health programs in Brazil for more than 30 years, phasing out support for family planning in 2000 once activities became self-sustaining. Over the years, the Agency's programs in Brazil, particularly those delivered in the northeast which is the largest underserved region in the country, helped establish a supportive environment for family planning. Programs concentrated on providing family planning services, training health care providers, conducting basic demographic and operations research, and developing strategies to include the public and private commercial sectors in reproductive health care provision.

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